

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 04/06/95

2 Serial/Patent # 08/387832

3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input checked="" type="checkbox"/> Filing	1	<u>16/3/95</u>	\$ <u>218.00</u>
<input type="checkbox"/> Amendment			\$
<input type="checkbox"/> Extension of Time			\$
<input type="checkbox"/> Notice of Appeal/Appeal			\$
<input type="checkbox"/> Petition			\$
<input type="checkbox"/> Issue			\$
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/> Maintenance			\$
<input type="checkbox"/> Assignment			\$
<input checked="" type="checkbox"/> Other <u>Declaration</u>			\$ <u>65.00</u>

7 TOTAL AMOUNT OF REFUND \$ 283.00

8 TO BE REFUNDED BY:

10 REASON:

Treasury Check

Overpayment

Credit Deposit A/C #:

Duplicate Payment

9 13-2725

No Fee Due (Explanation):

*EPO SEARCH
Declaration*

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: U PERSON

TITLE: Paralegal Specialist

SIGNATURE: DD Person

PHONE: 305 3737

OFFICE: PCP

***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****

APPROVED: Bill Phillips

DATE: 8-28-95

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B

ID	MCH	TPE	NAME OR ACCOUNT	C-NBR	MLEDTE	CURDTE	F-C	\$	AMOUNT
C	190	1	08387832	00018	950227	950227	961		690.00
C	190	1	08387832	00018	950227	950227	967		74.00
C	190	1	08387832	00018	950227	950227	254		65.00
C	190	1	08387832	00104	950607	950608	254		65.00
C	190	1	08387832	00105	950607	950608	581		40.00
C	190	1	08387832	00049	950810	950811	961		690.00-
C	190	1	08387832	00049	950810	950811	971		633.00
C	190	1	08387832	00049	950810	950811	967		2.00
C	190	1	08387832	00052	950810	950811	215		55.00

NO MORE TRANSACTIONS

END OF YOUR QUERY



Deposit Account Window Help



Deposit Account

Print Screen

Number: 500246

Balance Amount: 535.00

Holder

Name: BECK & TYSVER PLLP



Address

Attention: DANIELA TYSVER

Street: 1101 FIRST STREET SOUTH

SUITE 440

Province:

City: HOPKINS

State:

MN

Postal

55343

Country:

US

Telephone:

612-933-3043

Fax: 612-933-3049

Details

Category Code: NONGOVNMNT

Type: REGULAR

Notification Amt: 0.00

Status

Access Code: 3885

Active

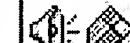
Closed

On...

USPTO Message...

Welcome to the ...

Deposit Acco...



8:51 AM